

## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS

SHARMA, RASHMI K

P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

# NOTICE OF ALLOWANCE AND FEE(S) DUE

7590

03/18/2004

EXAMINER

David L. Principe

Hodgson Russ LLP Suite 2000 One M&T Plaza

Buffalo, NY 14203-2391

ART UNIT

PAPER NUMBER

3651

DATE MAILED: 03/18/2004

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO

09/909,447

07/19/2001

Dieter Guldenfels

31529.0011

9657

TITLE OF INVENTION: SNAP-ON SIDE GUARDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/18/2004

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status is changed, pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above and notify the United States Patent and Trademark Office of the change in status, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check the box below and enclose the PUBLICATION FEE and 1/2 the ISSUE FEE shown above.
  - □ Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- II. PART B FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/909,447 07/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address' indication for "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE				or <u>Fax</u>	(703) 746-4000	•	
Pec(s) Transmittal. This certificate cannot be used for any other accompany pagers. Each additional pager, such as an assignment of formal drawing, have its own certificate of mailing or transmission.  David L. Principe Hodgson Russ LLP Suite 2000 One M&T Plaza Buffalo, NY 14203-2391  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 1912 On 19999,447 O7/19/2001 Dieter Guldenfels  APPLIN-TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(s) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Under Grown PTO/SB/1/22) attached. Under Grown PTO/SB/1/22 attached. Under Grown P	mess corrected beto	below of directed otherwise	respectively. It is a series of the series and series are series and series are series and series are series and series and series and series are series and series and series and series are series a	EE and PUBLIC and notification cifying a new c	CATION FEE (if requ of maintenance fees or orrespondence address	ired). Blocks 1 through 4 s will be mailed to the current ; and/or (b) indicating a sepa	hould be completed where correspondence address a arate "FEE ADDRESS" fo
David L. Principe Hodgson Russ LLP Suite 2000 One M&T Plaza Buffalo, NY 14203-2391  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99/909,447 O7/19/2001 Dieter Guldenfels  APPLINTYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 S130 S130 S130 S130 S130 S130 S130	CORRESPONDENCE AI	ICE ADDRESS (Note: Legibly mark-up	p with any corrections or use Blo	lock 1)	Note: A certificate of	mailing can only be used for	or domestic mailings of th
David L. Principe Hodgson Russ LLP Suite 2000 One M&T Plaza Buffalo, NY 14203-2391  APPLICATION NO. FILING DATE FIRST NAMED INVESTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99/99,447 07/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLICATION NO. SIDE GUARDS  APPLICATION NO. SIDE GUARDS  APPLICATION SIDE SAME AND SIDE GUARDS  APPLICATION SIDE SAME AND SIDE GUARDS  APPLICATION SIDE GUARDS  APPLICATION SIDE SAME AND SIDE GUARDS  APPLICATION SIDE SAME AND SIDE GUARDS  APPLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$330 \$360 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  U Change of correspondence address or indication form PTO/SB4/122) attached.  U "Fee Address" indication for "Fee Address" Indication form PTO/SB4/122) attached.  U "Fee Address" indication for "Fee Address" Indication form PTO/SB4/122) attached.  U Change of correspondence address or indication form PTO/SB4/122) attached.  U Change of correspondence address or indication form PTO/SB4/122) attached.  U Change of correspondence address or indication form PTO/SB4/122) attached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indication form PTO/SB4/122 intached.  U Change of correspondence address or indi					ree(s) Transmittal. The papers. Each addition	is certificate cannot be used : al paper, such as an assignme	for any other accompanying ent or formal drawing, mus
Hodgson Russ LLP Suite 2000 One M&T Plaza Buffalo, NY 14203-2391  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99/909,447 O7/19/2001 Dieter Guldenfels 31529,0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). U Change of correspondence address or indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignnee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)					have its own certificat	e of mailing or transmission.	3,
Buffalo, NY 14203-2391  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/909,447 07/19/2001 Dieter Guldenfels 31529,0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address indication (or "Fee Address" indication (or "Fee Address" indication (or "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for illing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)					Ce	rtificate of Mailing or Trans	smission
Buffalo, NY 14203-2391  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/909,447 07/19/2001 Dieter Guldenfels 31529,0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address indication (or "Fee Address" indication (or "Fee Address" indication (or "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for illing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)		r			States Postal Service	with sufficient postage for fir	st class mail in an envelop
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/909,447 07/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address' indication for "Fee Address" indication form PTO/SB/122) attached.  U "Fee Address' indication for "Fee Address" indication form PTO/SB/122) attached.  U "Fee Address' indication for "Fee Address' indication form PTO/SB/122) attached.  U "Fee Address' indication for "Fee Address' indication form PTO/SB/122) attached.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (CITY and STATE OR COUNTRY)					transmitted to the USI	TO, on the date indicated bel	above, or being facsimileow.
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/909,447 07/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENITTY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  L' Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  L' Fee Address' indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment (A) NAME OF ASSIGNEE (CITY and STATE OR COUNTRY)	lo, NY 14203-23	3-2391					(Depositor's name)
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/909,447 07/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  L'Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/2, Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment to MAME OF ASSIGNEE (CITY and STATE OR COUNTRY)							(Signature)
O9/909,447 07/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							(Date)
O9/909,447 O7/19/2001 Dieter Guldenfels 31529.0011 9657  TITLE OF INVENTION: SNAP-ON SIDE GUARDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	CATION NO.	FILING DATE	FIRST	l Named Inven	TOR	ATTORNEY DOCKET NO	CONFIRMATION NO
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$3300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  L' Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  L' "Fee Address" indication form PTO/SB/122) attached.  L' "Fee Address" indication form PTO/SB/122 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	909.447		1				
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  L' Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  L' "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE			D	Dictor Guidelliei	5	31329.0011	965 /
nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	INVENTION, SNAF	SNAT-ON SIDE GUARDS					
nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
nonprovisional NO \$1330 \$300 \$1630 06/18/2004  EXAMINER ART UNIT CLASS-SUBCLASS  SHARMA, RASHMI K 3651 198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	N. TRIPE	T average and	T				
EXAMINER  ART UNIT  CLASS-SUBCLASS  SHARMA, RASHMI K  3651  198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Li "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE				PU		TOTAL FEE(S) DUE	DATE DUE
SHARMA, RASHMI K  3651  198-837000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE	rovisional	NO	\$1330		\$300	\$1630	06/18/2004
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent). If no name is listed, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	EXAMINE	MINER	ART UNIT	CI	ASS-SUBCLASS	]	
CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE	SHARMA, RAS	, RASHMI K	3651		198-837000	•	
Address form PTO/SB/122) attached.  If we have a separate cover. Completion of this form is NOT a substitute for filing an assignment.  If the having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered attorney or agent set of the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  If the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	f correspondence add	ce address or indication of "Fe	`				
attorneys or agents. If no name is listed, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignmen been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	e of correspondence form PTO/SB/122)	lence address (or Change of C 122) attached.	Correspondence age	gents OR, altern rm (having as a	atively, (2) the name member a registered	of a single attorney or 2	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	/47; Rev 03-02 or m	tion (or "Fee Address" Indicat or more recent) attached. Use	tion form	torneys or agent			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	EE NAME AND RE	D RESIDENCE DATA TO B	BE PRINTED ON THE P	PATENT (print (	or type)	<u> </u>	
Please check the appropriate assignce category or categories (will not be printed on the retort).	E NOTE: Unless an a viously submitted to	s an assignee is identified bel ed to the USPTO or is being s	elow, no assignee data wi submitted under separate	rill appear on the e cover. Complet	patent. Inclusion of a ion of this form is NO	ssignee data is only appropria Γ a substitute for filing an assi UNTRY)	ate when an assignment hasignment.
Please check the appropriate assignce category or categories (will not be printed on the patent);	k the appropriate ass	e assignee category or catego	ories (will not be printed (	on the patent):	⊔ individual ∪ o	cornoration or other private or	coun entity   Lagvernmen
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):						orporation of outer private gr	oup chary Ggovernmen
☐ Issue Fee ☐ A check in the amount of the fee(s) is enclosed.	?ee		ŮA.	check in the am	ount of the fee(s) is end	losed.	
☐ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached.	ation Fee		⊔ Pa	ayment by credit	card. Form PTO-2038	is attached.	
☐ Advance Order - # of Copies ☐ ☐ ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number ☐ ☐ (enclose an extra copy of this form)	.ce Order - # of Cop	Copies	U Th	he Director is h	ereby authorized by cl	narge the required fee(s), or	credit any overpayment, to
Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.	Patents is requested	ested to apply the Issue Fee ar					
(Authorized Signature) (Date)	Signature)		(Date)				
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.	the applicant a re-	a registered attorney or age	ent or the accionee or	other norty in			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.	application form to comments on the s for reducing this t d Trademark Offic 0. DO NOT SENI c Commissioner for I	the to complete, including garm to the USPTO. Time will the amount of time you rithis burden, should be sent to Office, U.S. Department of SEND FEES OR COMPLE for Patents, Alexandria, Virg	amering, preparing, and : Il vary depending upon require to complete this to the Chief Information of Commerce, Alexand TED FORMS TO THIS ginia 22313-1450.	the individual is form and/or Officer, U.S. dria, Virginia IS ADDRESS.			

TRANSMIT THIS FORM WITH FEE(S)



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.usplo.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/909,447 07/19/2001		Dieter Guldenfels	31529.0011	9657
75	90 03/18/2004		EXAM	INER
David L. Principe Hodgson Russ LLP			SHARMA,	RASHMI K
Suite 2000			ART UNIT	PAPER NUMBER
One M&T Plaza Buffalo, NY 14203	-2391		3651	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			DATE MAILED: 03/18/200	4

# Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 62 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 62 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) system (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (703) 305-1383. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.